## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10071007

|   |  | CL AIMS A  | C EU ED  |                                    |                       |                                      |   | <del></del>            | ł       |                     |                        |       |  |
|---|--|--|--|------------------------------------|-----------------------|--------------------------------------|---|------------------------|---------|---------------------|------------------------|-------|--|
|   |  | CLAINS A   | S FILED - PART I  (Column 1) (Column 2)                      |                                    |                       |                                      | SMALL ENTITY                            |                        |         | OTHER THAN          |                        |       |  |
| TOTAL CLAIMS  |  |  | 39   |                                    | _ (COIC               | 11111 2)                             | TYPE [                                  |                        | OR      |                     |                        |       |  |
| FOR   |  |  |  |                                    | AUU 4959 5159         |                                      | RATE                                    | FEE                    | 4       | RATE                | FEE                    |       |  |
| _   |  |  | NUMBER FILED   |                                    | NUMBER EXTRA          |                                      | BASIC FEI                               | 370.00                 | OR      | BASIC FEE           | 740.00                 |       |  |
| Т   | OTAL CHARGE                                    | ABLE CLAIMS  | ろ7 minus 20= '   |                                    | *                     | / /                                  | X\$ 9=                                  |                        | OR      | X\$18=              | 34 <sub>2</sub>        | , U i |  |
| IN  | DEPENDENT C                                    | LAIMS  | 2_minus 3 = *  |                                    | *                     | 0                                    | X42=                                    |                        |         | X84=                | 2-10                   |       |  |
| Μl  | JLTIPLE DEPE                                   | NDENT CLAIM P  | RESENT   |                                    |                       |                                      | +140=                                   | 1                      | OR      |                     |                        |       |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2              |  |  |  |                                    |                       |                                      |   |                        | OR      | +280=               |                        |       |  |
|   |  |  |  |                                    |                       |                                      |   |                        | OR      | TOTAL               | 1082                   | 10    |  |
|   | C  |  | MENDED - PART II   |                                    |                       |                                      | OTHER THAN SMALL ENTITY OR SMALL ENTITY |                        |         |                     |                        |       |  |
| Г   |  | (Column 1) CLAIMS  | т поменти по под водинационационационационационационационаци | (Colum                             |                       | (Column 3)                           | SMALL                                   |                        | OR<br>• | SMALL               |                        |       |  |
| <b>AMENDMENT A</b>  |  | REMAINING<br>AFTER<br>AMENDMENT  |  | NUME<br>PREVIO<br>PAID F           | BER<br>USLY           | PRESENT<br>EXTRA                     | RATE                                    | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |       |  |
|   | Total  | *  | Minus  | **                                 |                       | =                                    | X\$ 9=                                  |                        | OR      | X\$18≂              |                        |       |  |
|   | Independent                                    | *  | Minus  | ***                                |                       | =                                    | X42=                                    |                        | 1       | X84=                |                        |       |  |
| _   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |  |                                    |                       |                                      | 7,12                                    | <b></b>                | OR      | 704=                |                        |       |  |
|   |  |  |  |                                    |                       |                                      | +140=                                   |                        | OR      | +280=               |                        |       |  |
|   |  |  |  |                                    |                       |                                      | TOTAL<br>ADDIT. FEE                     |                        | OR      | TOTAL<br>ADDIT. FEE |                        |       |  |
|   | -  | (Column 1)   |  | (Colum                             |                       | (Column 3)                           |   |                        | _       |                     |                        |       |  |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  | Mes as   | HIGHE<br>NUMB<br>PREVIO<br>PAID F  | ER<br>USLY            | PRESENT<br>EXTRA                     | RATE                                    | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |       |  |
|   | Total  | *  | Minus  | **                                 |                       | = .                                  | X\$ 9=                                  |                        | OR      | X\$18=              |                        |       |  |
|   | Independent                                    | *  | Minus  | ***                                |                       | =                                    | X42=                                    |                        | OR      | X84=                |                        |       |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |  |                                    |                       |                                      |   |                        | OR      | +280=               |                        |       |  |
|   |  |  |  |                                    |                       |                                      | TOTAL<br>ADDIT. FEE                     |                        | OR      | TOTAL               |                        |       |  |
|   |  | (Column 1)   |  | (Colum                             | n 2)                  | (Column 3)                           | ADDIT. FEET                             |                        | '       | ADDIT. FEE          |                        |       |  |
| MEN   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |  | HIGHE<br>NUMB<br>PREVIOU<br>PAID F | ST<br>ER<br>JSLY      | PRESENT<br>EXTRA                     | RATE                                    | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |       |  |
|   | Total  | *  | Minus  | **                                 |                       | =                                    | X\$ 9=                                  |                        | OR      | X\$18=              |                        |       |  |
|   | Independent                                    |  | Minus  | ***                                |                       | =                                    | X42=                                    |                        | Į       |                     |                        |       |  |
|   | FIRST PRESE                                    | NTATION OF MU  | ILTIPLE DEP  | PENDENT                            | CLAIM                 |                                      | A42=                                    |                        | OR      | X84=                |                        |       |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |  |  |  |                                    |                       |                                      | +140=                                   |                        | OR      | +280=               |                        |       |  |
| ***   | f the "Highest Nur<br>f the "Highest Nur       | nn 1 is less than the<br>nber Previously Pa<br>nber Previously Pa<br>ber Previously Paic | id For" IN THIS<br>id For" IN THIS                           | SPACE is I<br>SPACE is I           | ess thar<br>less thar | n 20, enter "20."<br>n 3. enter "3." | TOTAL ADDIT. FEE                        |                        |         | TOTAL<br>DDIT. FEE  |                        |       |  |